

**FEE TRANSMITTAL**

Electronic Version v08

Stylesheet Version v08.0

| <b>Title of Invention</b>   | Control Valve            |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
|---|--------------------------|-----------------|--|--------------------------------------|------------------------------------|--------------------|------------------|---|----------|----|------|------------------------|--|------|----|---|--|--|------------------------------------|--|--------------------------------------|
| Application Number :  |                          |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| Date :  |                          |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| First Named Applicant:  | Mr. Larry E Isakson      |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| Attorney Docket Number:   | R75396                   |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| <b>TOTAL FEE AUTHORIZED \$ 810</b>  |                          |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| Patent fees are subject to annual revisions on or about October 1st of each year.   |                          |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| Filing as large entity  |                          |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| <b>BASIC FILING FEE</b>   |                          |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| <table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>1001</td><td>770</td><td>770</td></tr><tr><td colspan="3"></td><td>Subtotal For Basic Filing Fees: \$ 770</td></tr></tbody></table>  |                          | Fee Description | Fee Code                               | Amount \$                            | Fee Paid \$                        | Utility Filing Fee | 1001             | 770   | 770      |    |      |                        | Subtotal For Basic Filing Fees: \$ 770 |      |    |   |  |  |                                    |  |                                      |
| Fee Description   | Fee Code                 | Amount \$       | Fee Paid \$                            |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| Utility Filing Fee  | 1001                     | 770             | 770                                    |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
|   |                          |                 | Subtotal For Basic Filing Fees: \$ 770 |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| <b>EXTRA CLAIM FEES</b>   |                          |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| <table border="1"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 7</td><td>0</td><td>1202</td><td>18</td><td>0</td></tr><tr><td>Independent Claims : 1</td><td>0</td><td>1201</td><td>86</td><td>0</td></tr><tr><td colspan="4"></td><td>Subtotal For Extra Claims Fees: \$ 0</td></tr></tbody></table> |                          | Fee Description | Extra Claim                            | Fee Code                             | Amount \$                          | Fee Paid \$        | Total Claims : 7 | 0   | 1202     | 18 | 0    | Independent Claims : 1 | 0                                      | 1201 | 86 | 0 |  |  |                                    |  | Subtotal For Extra Claims Fees: \$ 0 |
| Fee Description   | Extra Claim              | Fee Code        | Amount \$                              | Fee Paid \$                          |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| Total Claims : 7  | 0                        | 1202            | 18                                     | 0                                    |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| Independent Claims : 1  | 0                        | 1201            | 86                                     | 0                                    |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
|   |                          |                 |  | Subtotal For Extra Claims Fees: \$ 0 |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| <b>ASSIGNMENT FEES</b>  |                          |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| <table border="1"><thead><tr><th>Fee Description</th><th>Property Number</th><th>Quantity</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Recording Each Patent Assignment Per Property Fee</td><td>00000000</td><td>1</td><td>8021</td><td>40</td><td>40</td></tr><tr><td colspan="5"></td><td>Subtotal For Additional Fees: \$40</td></tr></tbody></table>               |                          | Fee Description | Property Number                        | Quantity                             | Fee Code                           | Amount \$          | Fee Paid \$      | Recording Each Patent Assignment Per Property Fee | 00000000 | 1  | 8021 | 40                     | 40                                     |      |    |   |  |  | Subtotal For Additional Fees: \$40 |  |                                      |
| Fee Description   | Property Number          | Quantity        | Fee Code                               | Amount \$                            | Fee Paid \$                        |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| Recording Each Patent Assignment Per Property Fee   | 00000000                 | 1               | 8021                                   | 40                                   | 40                                 |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
|   |                          |                 |  |                                      | Subtotal For Additional Fees: \$40 |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| <b>AUTHORIZED BILLING INFORMATION</b>   |                          |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| <b>The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</b>   |                          |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| Deposit account number:   | 023222                   |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| Access Code   | ****                     |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| Deposit name:   | Robert Bosch Corporation |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| Deposit authorized name:  | Leo H. McCormick Jr      |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |
| Signature:  | leohjr                   |                 |  |                                      |                                    |                    |                  |   |          |    |      |                        |  |      |    |   |  |  |                                    |  |                                      |

Date (YYYYMMDD): 2003-12-19

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.